

Date \_\_\_\_\_

Location \_\_\_\_\_

Discipline \_\_\_\_\_

Instructor \_\_\_\_\_

No.	Student Name	New	Fees	Comments / Equipment
1				
2				
3				
4				
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29				
30				

**Non-Paying Personnel**

1				
2				
3				
4				
5				

Instructor signed \_\_\_\_\_